

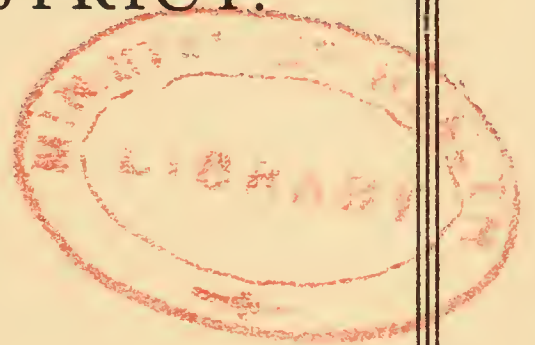
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RUSHDEN URBAN DISTRICT.



ANNUAL REPORT

of the

Medical Officer of Health

for the

Year 1943.



D. A. McCracken, M.D.



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D. A. McCracken, M.D.

PRINTED BY
J. F. COOK AND SONS (PRINTERS) LTD., CHURCH STREET, RUSHDEN.

SUMMARY OF VITAL STATISTICS, 1943

Area (in acres)	3,777
Population 1921 (census)	13,511
,, 1931 ,, 	14,247
Number of separate dwellings occupied 1921 (census) ...	3,076
,, ,, ,, ,, ,, 1931 ,, 	3,827
,, ,, ,, ,, ,, 1943 	4,800
Rateable value 1943	£87,354
Product of a penny rate 1943	£347

Live Births.	<i>Total</i>	<i>Male</i>	<i>Female</i>	<i>Rate</i>
Legitimate	266	138	128	
Illegitimate	15	7	8	18.14
	<hr/> 281	<hr/> 145	<hr/> 136	

Stillbirths.				
Legitimate	10	7	3	
Illegitimate	4	3	1	0.89
	<hr/> 14	<hr/> 10	<hr/> 4	

	<i>Total</i>	<i>Male</i>	<i>Female</i>	<i>Rate</i>
Deaths (all causes)	172	84	88	11.11

Deaths from Puerperal Causes.

Puerperal and post-abortive sepsis	nil.
Other puerperal causes	nil.

Infant Mortality—rate per 1,000 live births :

Legitimate	30.07
Illegitimate	nil.
Total	28.47
Deaths from Cancer (all ages)	31
Deaths from Measles (all ages)	nil.
Deaths from Whooping Cough (all ages)	nil.
Deaths from Diarrhoea (under 2 years of age)	nil.

Rushden Urban District Council.

Members of the Health and Sanitary Committee :

MESSRS. J. H. J. PARAGREEN (Chairman), A. F. WEALE, J.P., (Chairman of the Council), J. ALLEN, T. W. COX, J. E. DILKS, J. GEORGE, F. GREEN, MRS. A. U. MUXLOW and W. J. SAWFORD.

Public Health Officers of the Local Authority :

Medical Officer of Health,

DAVID ANDREW MCCrackEN, M.D., Ch.B., D.P.H.

also holds appointments of

Deputy County Medical Officer of Health ;

Deputy School Medical Officer ;

Medical Officer of Health, Borough of Higham Ferrers.

Medical Officer of Health, Irthlingborough Urban District Council.

Medical Officer of Health, Towcester Rural District Council.

Medical Officer, Kettering Venereal Diseases Treatment Centre.

Sanitary Inspector, Meat Inspector, etc.

FREDERICK SAMUEL FIELDING PIPER, M.S.I.A., C.R.S.I.

also holds appointment of :

Sanitary Inspector (temporary), Borough of Higham Ferrers.
(from December, 1943).

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*June, 1944.***To the Chairman and Councillors of the Urban District of Rushden.**

MR. CHAIRMAN, MRS. MUXLOW AND GENTLEMEN,

I have the honour to submit for your consideration my report on the health of the district for the year ending 31st December, 1943. The report is drawn up on the lines suggested in various circulars issued by the Ministry of Health.

The vital statistics are satisfactory. The birth rate attained the relatively high figure of 18.14, which is the highest rate recorded since 1920. The rate now shows a definite upward trend but it brings to focus the low rate of reproduction as compared with the rate for the Rushden Sub-District Area of the Wellingborough Rural Sanitary Authority in 1899 when the figure of 46.1 was recorded. The number of registered births was given as 491 in the population of 11,800 as compared with the 281 live births registered in 1943. I have abstracted from various sources the detailed history of the rate for 1897—1943, which I trust will be of interest to the council. It is noteworthy that the rate diminished during the last war and continued at a relatively low figure during the period of belligerency whereas in the present war the rate shows an upward trend. I have included a table in the statistical section giving details of stillbirths and illegitimacy for the decade 1934-43. From the table it will be noted that both rates show an increase during the war period. The infant mortality shows an increased rate from 23.90 in 1942 to 28.47 in 1943. The rate however may be regarded as very satisfactory and is far below that for England and Wales.

The sanitary circumstances of the district were well maintained but the sufficiency of the water supply gave rise to some anxiety during the last quarter of the year.

Although the provision of new houses has virtually ceased for the duration of hostilities there are indications that there will be no latent period between the end of the war and the resumption of building operations.

There were no epidemics of major zymotic diseases during the year. The incidence of scarlet fever (1.23) was much below that for England and Wales (3.01). The morbidity from notifiable pneumonia was 5.1 per thousand as compared with 1.34 for the country. This was undoubtedly due to the prevalence of respiratory infections during the last quarter of the year. No cases of diphtheria were notified. It is gratifying to note that 80% of children between 5—15 years have been immunised against diphtheria. The numbers immunised under five years is relatively

good (56%), but since the mortality from this preventable disease is highest amongst the lower age group it behoves parents to have their children immunised so that the 'herd immunity' of the population be raised and maintained at a high level. The influenza epidemic of 1943-4 which swept the country produced a high morbidity in the town. The mortality, which is due to respiratory complications, was for the year only 0.19 against 0.37 for the country. The mortality and morbidity from tuberculosis is lower than that for 1942.

A further milestone in the history of the 'war' against tuberculosis will be passed when mass-miniature radiography is introduced into the county in 1944. This will enable the pulmonary form of the disease to be detected in its early and curable stages.

I acknowledge with gratitude the support I continue to receive from the members of the Council and the assistance and advice afforded me by the executive officers of the Council and the Water Board.

I have the honour to be,

Your obedient servant,

D. A. McCracken,

Medical Officer of Health.

SECTION A.

NATURAL AND SOCIAL CONDITIONS.

Area. The area of the district is 3,777 acres.

Population. The estimated resident population of the district is not available for publication.

Death Rate. The total number of deaths assigned to the district after adjustment for inward and outward transfers by the Registrar-General was 172 as compared with 163 for 1942. The death rate based on the estimated mid-year population was 11.11 as compared with 10.03 for the previous year. The rate recorded was one per thousand less than that for England and Wales. The following table shows the death rates for the quinquennium 1939-43, together with corresponding rates for England and Wales and the Administrative County so far as they are available. The 'comparability factors' for the standardisation of the death rates for 1941-43 are not available owing to the magnitude and variety of local population movements and the uneven distribution of civilian war deaths.

<i>Rushden</i>					<i>Standardised Death Rate</i>		
<i>Year</i>	<i>Total</i>	<i>Male</i>	<i>Fe- male</i>	<i>Recorded Rate</i>	<i>Rushden</i>	<i>Administrative County</i>	<i>England & Wales</i>
1939	152	72	80	9.69	9.59	10.5	12.1
1940	233	119	114	14.05	13.49	11.3	14.3
1941	185	102	83	10.51	*	11.94†	12.9
1942	163	82	81	10.03	*	11.02†	11.6
1943	172	84	88	11.11	*	†	12.1

* Not available. † Recorded rate.

A list of the causes of death classified according to the International List of Causes of Death is given in Table No. 1 page 24, whilst the history of some of the principal causes of death for 1929-1943 is shown in Table No. 2 page 25. From the latter table it will be seen that the death rate for tuberculosis and diseases of the heart show some reduction. On the other hand the death rate for cancer has reached the comparatively high rate of 2.00. The rate for respiratory infections increased from 0.80 in 1942 to 1.29 in 1943, this increase being in part due to the epidemic of influenza with its accompanying respiratory lesions which took place during the last quarter of the year.

Birth Rate. The number of live births assigned to the district was 281 as compared with 251 in 1942, thus giving an increase of 11.3%. The number of births registered was equivalent to 18.14 per 1,000 of the civilian population and is the highest rate recorded since 1921.

The ratio of births to population sums up all the factors governing the rate at which the community is reproducing itself and when taken in conjunction with the corresponding death rate affords an approximate means of ascertaining the natural increase of the population. During the past forty-seven years the birth rate attained its highest value in 1899 when it exceeded 37 per 1,000 of the population. Since that time the rate progressively diminished to the rate of 12.7 in 1918. Following the return of the combatants the rate rose sharply to 22.7 in 1920 and thereafter it steadily diminished to the very low figure of 11.2 in 1934. Since then the trend has been slowly upwards, showing a definite impetus during the present war to attain the relatively high value of 18.14. The trend of the birth rate for the period 1897-1943 is set out in detail together with other vital statistics for the corresponding period in Table No. 3, page 26. The local birth rates together with those for the administrative county and the country as a whole for the quinquennium 1939-43 are as follows :

Birth Rate 1939-43.

			1939	1940	1941	1942	1943
Rushden	...	...	14.15	12.42	10.90	15.45	18.14
Administrative County	...		15.02	13.94	13.51	16.66	
England and Wales	...		15.00	14.60	14.20	15.80	16.50

The increase in the number of births has created certain difficulties for parents in making arrangements for confinements. Crowded home conditions, the absence of neighbours and domestic assistance, the husband in the forces, are some of the factors which have tended to create a desire on the part of mothers to seek accommodation in hospital or nursing home. The demand for in-patient accommodation is in excess of the available beds at the disposal of the Maternity and Child Welfare Authority and nursing home proprietors.

Stillbirth Rate. The number of stillbirths registered was fourteen as compared with five in 1942. This is the highest number of stillbirths registered during the past twenty years and is the equivalent of 0.89 per 1,000 of population as compared with the rate of 0.5 for England and Wales. The history of the rate for the past decade is given in Table No. 4, page 27, together with rates for illegitimacy and masculinity of birth.

Illegitimate Birth Rate. Fifteen illegitimate live births were registered as compared with nineteen during the previous year. This is equivalent to a rate of 53.46 per 1,000 live births and contrasts with the rate of 75.7 for 1942. The rates for the decade 1934-43 are shown in Table No. 4, page 27.

Maternal Mortality. It is very gratifying to record that no deaths were assigned to puerperal causes or other conditions associated with childbirth.

Infant Mortality. The rate of 28.47 whilst not quite so satisfactory as that of 23.9 for 1942 brings to focus the fact that there has been a steady downward trend during the past forty years punctuated by incidental fluctuations. The rate which is commonly cited as an index of the hygienic state of a community reflects vividly the continued improvement which has taken place in the health services and environment of the town. The rates for 1939-43 together with the number of deaths were :

Deaths under one year per 1,000 live births.

	1939	1940	1941	1942	1943
Rushden ...	26.67(6)	77.67(16)	54.18(11)	23.90(6)	28.47(8)
Administrative					
County	40.40	40.20	48.10	34.50	
England and					
Wales	50.00	55.00	59.00	40.00	49.00

Number of deaths shown in brackets.

The infants who die in a given year are not necessarily the same infants who are born during that year. Where there is a wide variation in the number of births in successive years or where there is a diminished proportion of females of child-bearing age in a community, the rate may be over or under-stated. The question may arise in the reader's mind as to why the age specific death rate under one year is not used as a measure of infant mortality. Such would be the practice if it were possible to obtain an accurate area distribution of population during the inter-census years. But, because of this difficulty the computations would contain large errors whereas, as the registration of births is accurate, the infant mortality rate is generally used as a measure of the infant mortality rather than the simple age specific death rate under one year. The number of babies exposed to risk of death in a given year is held to be a fair index of the number exposed to risk of death under one year, because, e.g. a baby born on 1st December of a given year is only exposed to risk of dying within that calendar month. But on the other hand given a fairly stable population and accurate registration of births, the error on the absolute value will be constant over a fairly long period of time and, because constant, the variations will be negligible when the rates are used for comparative purposes. These features will be apparent if a series of rates such as are shown in Table No. 3, page 26, are critically examined and correlated with the improvements which have taken place in such environmental services as housing, water supply, sewerage, etc., together with the services provided for the care and nurture of infants.

Neonatal Mortality. This sub-division of the infant mortality rate includes all children who die within 28 days of independent existence. The neonatal death rate per 1,000 live births, together with the nett number of deaths for 1939-43 was :

1939	1940	1941	1942	1943
16.3(2)	27.71(5)	24.63(5)	24.54(6)	21.3(6)

The neonatal deaths are the hard kernal of infant mortality and the further reduction of the rate is beset with many difficulties, operating before birth, during parturition and in the immediate post-natal period. The problem calls for further research in the care of the newborn, and the provision of special facilities for the nursing care of premature babies. A classification of the causes of death together with those for the total infant mortality is given in Table No. 5, page 27.

SECTION B.

GENERAL PROVISION OF HEALTH SERVICES.

Laboratory Facilities. The laboratory work associated with the diagnosis and control of infectious diseases continues to be carried out by the Bacteriologist of the Emergency Public Health Laboratory Service at the Northampton General Hospital. The cost of the service to the local authority is five guineas per annum.

Samples of milk are examined for bacteriological cleanliness and keeping quality by the methylene blue reduction test at the County Public Health Laboratory in Northampton.

Diphtheria Antitoxin. A supply of antitoxin continues to be maintained at the Council Offices in accordance with the provisions of the ‘Diphtheria Antitoxin (Outside London) Order, 1910,’ and is available free of charge to medical practitioners for use in the town.

Ambulance Service. During the year the Rushden and District Ambulance Association purchased an additional Ford V-8 ambulance. This ambulance is being used for the removal of non-infectious cases to hospital whilst the Morris Ambulance is maintained as a reserve vehicle. Both are garaged at the Lightstrung Motor Company’s garage in Church Street. The work of removal is carried out by a member of the St.

John Ambulance Brigade. The service is adequate for the needs of the town. The ambulances carried out 312 removals involving a total mileage of 9,822 miles. Cases of infectious disease are removed by the Joint Isolation Hospital's ambulance.

Nursing in the Home. The Rushden Nursing Association which is affiliated to the Northamptonshire Nursing Association employs three nurses, all of whom are State Registered Nurses and State Certified Midwives. The Nurses' Home is situated in Griffith Street (Tel. 587). The area covered by the association includes Higham Park, Newton Bromshold as well as the town. Details of the work carried out during 1943 is as follows :—

Cases Nursed.

General 179. Midwifery 73. Maternity 108. Total Visits 9,168.

Treatment Centres and Clinics. The Child Welfare Centre was established by the County Council in conjunction with a local Voluntary Committee in 1920. The Medical Officer is an Assistant County Medical Officer of Health and the Superintendent is the local Health Visitor. The work of the centre has steadily increased since its inception, and meets at the Independent Wesleyan Church Schools in Queen Street at 2 p.m. every Wednesday. Diphtheria immunisation is carried out on the first Wednesday of each month. The voluntary committee who undertake the social aspects of the welfare work as distinct from preventive medicine have undertaken the distribution on behalf of the Ministry of Food, of dietary supplements such as orange juice and vitaminised oil. In addition, they are responsible for the issuing and exchange of the special respirators for babies and gas masks for toddlers.

The Antenatal clinic which is provided by the County Council meets at the aforementioned premises every Tuesday at 10 a.m.

There appears to be adequate grounds for supporting the view that the establishment of an *ad hoc* clinic for the town is now a necessity and the provision of suitably designed premises together with the necessary appliances and equipment would be an asset towards promoting still further the preservation and maintenance of child health.

A School Clinic for diphtheria immunisation is held once monthly on a Saturday morning at the Alfred Street Junior School.

The Manfield Orthopaedic Clinic which acts as a local out-patient department of the Manfield Orthopaedic Hospital, Northampton, holds its clinics every alternate Friday at the Independent Wesleyan Church Schools.

Hospitals. There is no material change in the local hospital facilities as recorded in 1942. The precept levied on the Council by the Joint Isolation Hospital Board for the year was £513.

SECTION C.

SANITARY CIRCUMSTANCES OF THE DISTRICT.

Water Supply. The supply to the town is provided by the Higham Ferrers and Rushden Water Board. The gas engines and plunger pumps at Sywell were scrapped during the year and an additional centrifugal pump installed. During the year the supply of water was adequately maintained until December, when due to the diminished stock in the reservoir at Sywell, a drastic curtailment of the supply was inevitable. This was due to the exceptionally low rainfall during two successive years. The supply was being augmented by pumping water from the shallow well in the Nene Gravels at Hardwater Crossing, but due to the small capacity of the pump, it was very doubtful if this additional supply in itself would be sufficient to allow for a constant supply to the town. At the end of the year the Board were taking steps to further augment the supply from Hardwater Crossing.

Regular bacteriological examinations of the supply showed that the water invariably fell into Class I. of the Ministry of Health's classification for piped water supplies.

The rainfall for 1939-43 was as follows :

		1939	1940	1941	1942	1943
Rushden	...	30.98	25.92	31.21	22.85	18.72
Sywell	... ..	29.47	26.76	25.72	20.75	17.35

The daily consumption of water per head of population was :

	1939	1940	1941	1942	1943
Domestic and					
Municipal Purposes	17.75	18.20	19.18	18.95	20.01
Trade Purposes	2.72	3.16	3.05	2.80	3.50

Sewage Disposal, Drainage and Sewerage. There have been no material changes in the circumstances reported in 1938. The average daily flow entering the works was :

Filtered : 473,944. Storm : 46,333. Total : 520,277 gallons.

Closet Accommodation. The circumstances remain similiar to those reported in 1938.

Disinfection. Full details of the work carried out in the steam disinfectors are given in Table No. 7, page 28. Liquid disinfectants are issued by the Sanitary Inspector to households for concurrent and terminal disinfection purposes.

Eradication of Bed Bugs. Twenty-four rooms were treated for infestation by *Cimex lectularius* by means of proprietary preparations. In appropriate cases skirting boards, etc., were loosened before treatment with "Zaldecide." Bedding and clothing was treated by pressure steam.

Scabies. A few cases came to notice. The numbers however were much less than in the previous four years.

Swimming Bath. The bath continues to be maintained in a satisfactory state and bacteriological examinations showed that the filtration and chlorination apparatus function efficiently.

Moveable Dwellings : Public Health Act, 1936, S269. No licences were granted.

Rats and Mice (Destruction) Act, 1919. Infestation Order, 1943. The rodent population is at a low level in the town, and no major infestations have come to the notice of the Sanitary Inspector.

Public Cleansing. No change in the methods of collection or disposal falls to be recorded. The number of loads together with the weight of refuse collected was :

Loads : 1,381. Tons : 3,455.

Further details of the sanitary inspections are shown in the statistical section.

SECTION D.

HOUSING.

There were no houses erected in the town during the year. The usual statistical details so far as they are available are given in Table No. 10, page 31.

SECTION E.

INSPECTION AND SUPERVISION OF FOOD.

Milk Supply. Samples of milk taken in the course of delivery to the consumers have been submitted at regular intervals to the County Laboratory for examination for cleanliness and keeping quality. The number of samples submitted to the methylene blue test and the classification of the results was :

<i>Classification.</i>					<i>No.</i>	<i>Per cent.</i>
Good	...	...	...	...	68	56
Moderate	...	...	...	...	30	24
Bad	...	...	...	...	26	20
					<hr/>	
Total					124	—
					<hr/>	

The results of the tests are a definite improvement on the previous year when 41% were classified as ‘ bad.’ The classification of the results are arbitrary and based on a county standard since there are no prescribed tests for bacteriological cleanliness and keeping qualities for non-designated milk. Further details of the monthly results are given in Table No. 11, page 32.

The cleanliness of milk depends on its freedom from an undue number of bacteria and leucocytes, whilst the keeping quality refers to the length of time the milk will remain sweet and free from tastes and odours which will render it unpalatable. The term safety is a relative one since dirty milk if free from disease producing bacteria may be quite safe for human consumption. Clean milk is aesthetically desirable as it keeps longer and has a better flavour. So far as safety is concerned no raw milk can be regarded as completely safe for human consumption. The only satisfactory way of eliminating the danger is by regularly controlled pasteurisation of milk and other forms of heat treatment.

The milk supplied to the local schools is pasteurised.

Food Premises. The Sanitary Inspector paid the following visits to food premises :—

Butchers Shops	...	...	...	2
Grocery Stores	...	...	...	23
Fish Stores	...	...	...	4
Other premises	...	...	...	3
Fruit Stores	...	...	...	1

The prevention of the contamination of food is a most important obligation which is placed on food handlers under the Food and Drugs Act, 1938, S.13, for the prevention of alimentary infections. It cannot be too strongly emphasised that the management and food handler is obliged by law to ensure that cleanliness be observed by all persons employed and that there shall be provided suitable washing basins, a supply of soap, clean towels and clean hot and cold water. As there is reason to believe that dysentery which is an alimentary infection, is endemic in the country the maintenance of high standards of personal cleanliness amongst food handlers is self evident.

As the result of the Government's Food Control Scheme and the need for official certificates for unfit food there must be little spoilage which does not come to the notice of the inspector. Details of the food surrendered is given in Table No. 12, page 32.

Livestock (Restriction on Slaughtering) Order, 1940. The Sanitary Inspector continued to carry out the arduous duty of meat inspection at the Rushden Industrial Co-operative Society's slaughterhouse at Bedford Road. The work carried out is for neighbouring areas as well as for the town. Whilst the control of slaughtering and the inspection of meat is a public health function of paramount importance the fact remains that the Council is providing the inspectorate for outside authorities without receiving any contribution towards the inspectors' remuneration. A brief summary of the work performed by the inspector is shown in Table No. 13, page 32. The inspector made 512 visits to the Slaughterhouse during the year, and inspected 16,584 carcasses. Each visit may involve from two to four hours work of inspection.

SECTION F.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Smallpox. No cases were notified.

Scarlet fever. Nineteen cases were notified during the year as compared with 25 in 1942. The cases were of mild clinical type and no deaths occurred. Three of the cases occurred at the London County Council evacuee Nursery Party at Eastfields, and were treated in hospital.

Diphtheria. No cases of diphtheria were notified.

Diphtheria Prophylaxis. The immunisation of the child population at risk has proceeded smoothly and beneficial effects are beginning to become apparent. The high level of immunised children may result in an increased number of carriers in the population. This may lead to difficulty in the diagnosis of throat lesions. A positive swab for *C. diphtheriae* in a child who has none of the clinical manifestations of diphtheria will naturally raise some doubt in the clinician's mind as to the aetiology of the lesion. A child who has the clinical signs of diphtheria should be notified irrespective of the results of the bacteriological examination. The swab should be regarded merely as an adjuvant to clinical diagnosis and not as its substitute. Some doubt may arise as to the immune status of the population if the carrier rate is increased. However, if it is appreciated that immunisation only raises the individual level of immunity against the toxin and not against the corynebacterium it then becomes evident that the presence of carriers is beneficial in raising the antibacterial level of immunity in the population, and that in itself is beneficial to the community at risk. In order to maintain the immunity of the population at a high level it behoves all parents to take advantage of the facilities for immunisation offered by their own family doctors or the local authority.

It has been suggested to me that immunisation against diphtheria with Alum-Precipitated Toxoid might well be combined with protection against whooping cough by combining a vaccine with the toxoid. So far, scientific evidence has shown that the value of whooping cough vaccine as a prophylactic is of doubtful value. A report from the Emergency Public Health Laboratory, Oxford, showed that by a controlled experiment inoculation afforded no protection against whooping cough in a residential nursery, or so far as could be judged did not modify the severity

of attacks. The present position is that the antigenic value of the vaccines, as presently prepared, are not on so sound a basis as the toxoid of diphtheria. Further research into the value and the preparation of more potent vaccines is proceeding and there are good grounds for expecting that the day is not far distant when protection against whooping cough will be accomplished as simply as that against diphtheria.

The following table shows the number of children who were immunised as at June and December together with the estimated percentage of the population at risk immunised after correction for those who have passed out of the respective age groups. Children who have been immunised by private arrangement have not been included in the estimates.

1943.

	0—5 years		5—15 years	
	<i>No.</i>	<i>Estimated%</i>	<i>No.</i>	<i>Estimated%</i>
June	669	58	1,671	63
December	653	56	1,682	63

The Registrar-General has provided certain information based on the number of children in the district and from this it is estimated that the percentage of children immunised for the under five group was 56.6 and for the five to fifteen group 79.9.

Puerperal pyrexia. One case was notified in August under the Puerperal Pyrexia Regulations, 1939. The case recovered.

Pneumonia. The incidence of pneumonia was heavy as compared with 1942. There were 79 cases (males 49, females 30), notified as compared with 42 in the previous year. The maximum number of cases were notified during the first and last quarters of the year. The heavy incidence during December was associated with the presence of an influenza epidemic, but only six cases were specifically notified as suffering from influenzal pneumonia.

Erysipelas. The majority of the eight cases notified occurred in persons over forty years of age. There were no deaths.

Dysentery. One case of acute bacillary dysentery due to Flexner's bacillus was notified in a male aged ten years. Recovery took place.

Cerebro-spinal fever. Two adult cases were notified (one male, one female). There were no deaths.

Chicken-pox. One evacuee child was reported and removed to hospital as facilities were not available for nursing in the billet.

Measles. The anticipated biennial epidemic of measles became manifest in the town during April and continued until July. The seasonal prevalence of measles was thus in contrast to the last epidemic which visited the town from June, 1940, until March, 1941. A total of 502 cases (244 males, 256 females) were notified in 1943 as compared with the previous epidemic of 758 cases in 1940-41. The maximum morbidity fell on the 5—15 years age period in both epidemics. In 1940-41, 11.7% of cases notified occurred under eighteen months whereas in 1943 the corresponding figure was 9.3%. The incidence amongst the population was, for 1943, 32.4 per thousand, as compared with 9.88 for England and Wales. I estimate that some 15.9 per 1,000 of population under 15 years of age were infected in 1943. The disease was of mild type and no deaths were assigned to measles.

Whooping Cough. A total of 72 cases (39 males, 33 females) were notified as compared with 42 in the previous year and 119 in 1941. The rate per 1,000 of the population was 4.64 as compared with 2.54 for England and Wales. An interesting feature of the local epidemiology of measles and whooping cough is the fact that the number of cases of the latter infection are relatively few as compared with the former. This is apparent from the following details of cases notified for the quinquennium 1939-43.

Number of Cases Notified.

		1939	1940	1941	1942	1943
Measles	... ..	2	618	140	8	502
Whooping Cough	...	11	22	119	42	72

The usual epidemiological history of these two diseases is that they occur in epidemic form in alternate years, but, so far at least from the notification point of view this feature has not become very apparent in the town.

A Table showing the age and sex distribution for measles and whooping cough is given on page 33.

Influenza. In common with the rest of the country an epidemic of this infectious disease took place. The epidemic became manifest at the beginning of December and some index of the incidence can be gained from the fact that seventeen cases of ‘ pneumonia ’ were notified during that month. Of the six cases notified as suffering from influenzal pneumonia all were in the third or fourth decades. There were three deaths ascribed to influenza during the year.

Influenza as such is not a notifiable disease so that the true incidence, and age grouping of the cases could not be ascertained. As an index of the morbidity from the disease the British Institute of Public Opinion assessed the incidence in the country at 27%. Dr. L. Hoyle, Bacteriologist

at the Emergency Public Health Laboratory, Northampton, who has been examining the blood sera of persons living in the County for some time for the presence of influenza anti-body concluded that 27% of the county population suffered from the infection which was serologically shown to be *virus B*.

Closure of Schools. No action was considered necessary under Article 57, of the Elementary Education Provisional Code, 1922, which is as follows :—

‘ If the Sanitary Authority of the district in which the school is situated, or any two members thereof acting on the advice of the Medical Officer of Health, require either the closure of the school or any department thereof or the excluding of certain children for a specified time, with a view to preventing the spread of disease or any danger to health likely to arise from the condition of the school, such requirement must at once be complied with.’

Tuberculosis. There were eighteen new cases of tuberculosis notified as compared with twenty during 1942. Thirteen cases had pulmonary manifestations (seven males, six females) and five (females) suffered from non-pulmonary lesions. Of the latter number, three had glandular infection, one a cervical abscess and one tuberculous osteitis of a metacarpal bone. Two females aged 24 and 39 years who were notified as pulmonary cases died within seven months of notification.

The number of new cases (all forms) notified during the quinquennium 1939-43 was as follows :—

1939	1940	1941	1942	1943
15	15	21	20	18

The mortality rate during the corresponding period as compared with the Administrative County was as follows :—

1939-43.

Year	Tuberculosis—all forms			Rate per 1,000 of population	
	Male	Female	Total	Rushden	County
1939	6	6	12	0.76	0.49
1940	8	5	13	0.78	0.58
1941	10	4	14	0.79	0.50
1942	4	4	8	0.49	0.49
1943	2	3	5	0.32	

It was not found necessary to take any action under the Public Health (Prevention of Tuberculosis) Regulations, 1925 (relating to persons suffering from pulmonary tuberculosis employed in the milk trade), or under Section 172 of the Public Health Act, 1936 (relating to the compulsory removal to hospital of persons suffering from tuberculosis) during the year.

Mass Miniature Radiography. The County Council as the Tuberculosis Authority has been allocated a Mass Miniature Radiography apparatus by the Ministry of Health, and it is anticipated that the set will be available for use in the autumn of 1944.

It has become increasingly evident during the past decade that tuberculosis of the lungs can be diagnosed by means of X-ray examination before clinical signs and symptoms become manifest. The discovery by such means of early tuberculous lesions will ensure that the whole resources of preventive and curative medicine will be available to persons who are suffering from pulmonary tuberculosis. The radiography set can take inexpensive films 2" x 3" in a very short space of time so that a considerable number of persons may be examined within a few hours. Examination of the miniature films indicates the individuals whose chest shadows are within normal limits and those who require further investigation. Persons with abnormal X-ray films require further investigation. This includes the taking of a full size radiogram together with a complete clinical and bacteriological examination.

The use of the machine is not confined to the detection of tuberculosis but may also bring to light such pathological entities as lung tumours, dilatation of the bronchi, low grade pneumonia, cardiac disease and other abnormalities.

It is understood that the County Council's Public Health, Housing, Maternity and Child Welfare Committee intend carrying out the first of the county surveys in the town, and I unreservedly recommend to the townspeople that they take full advantage of this service which unquestionably is one of the greatest advances in preventive medicine made in this country during the past fifty years.

Associated with the advent of mass radiography, the Government introduced a system of monetary grants to ensure that persons who are suffering from early tuberculosis would not be deterred from accepting treatment. The Government scheme allows of payments only to persons who are considered curable, but, the County Council have declared a bold and progressive policy not to make any differentiation between so-called early and chronic cases.

Tuberculosis After-Care. The Rushden Tuberculosis After-Care Committee has continued its magnificent work under the guidance of a well-informed executive Committee. With the introduction of the Government Allowance Scheme, there were fears in certain areas throughout the country that there would be no further need for tuberculosis

after-care committees. Such fears are groundless since it was made clear by the former Minister of Health (Mr. Ernest Brown), that there would be much that Committees could do, not only in assisting the tuberculosis authority in operating the allowance scheme, but in preventive and educational work, both of which are of paramount importance. The Committee have been ardent advocates for mass radiography, and they will be gratified to note that Rushden has been selected by the County Council as the first area in which a mass radiography survey will be made.

Statistical details regarding the monthly incidence and age periods for all notifiable diseases are given in Tables Nos. 16 and 17, pages 34 and 35.

SECTION G.

HEALTH EDUCATION.

The publications of the Central Council for Health Education on such subjects as "Scabies," "Impetigo," "From Boyhood to Manhood," "The Approach to Womanhood," "Women in Wartime," "Facts on Sex for Men," "Venereal Diseases," etc., were distributed through various agencies in conjunction with the County Council during the year. In addition, Central Council for Health Education posters on Venereal Diseases were distributed to factories in the town.

I have continued to carry out, so far as circumstances permit, educational work, especially amongst youth organisations, not only in the town, but in other areas of the County. The experience gained has justified the assumption that the youths of the town and district have a healthy appetite for knowledge on health matters and the machinery of local government. I may say that the work amongst the youth organisations has the full support of the Education Committee of the County Council who are charged with the responsibility of youth organisation.

As the result of the national propaganda on the subject of venereal diseases it was suggested that I should deliver *ad hoc* lectures on this subject to youth organisations. Experience has confirmed my viewpoint that such a procedure would be disastrous since it directs the youthful and emotionally immature mind towards the negativistic aspects of living rather than creating as the objective the road to positive health with its high standard of mental and physical hygiene.

The following talks and lectures were given in 1943, and I set out in detail the syllabus which was followed for the lectures to youth organisations so that the Council may be fully aware of the scope of the subject material.

<i>Month.</i>	<i>No. of Lectures.</i>	<i>Organisation.</i>	<i>Approximate Attendance.</i>
February	Four	Girls Training Corps, Rushden.	70
	(1)	Brief description of the body and its functions. The importance of maintaining health by prompt attention to minor ailments such as indigestion, colds, rashes, sore eyes, earache, etc.	
	(2)	The skin and its functions. How to prevent skin trouble such as scabies, ringworm, impetigo. The danger of infection and re-infection. The need for changing under-garments and maintaining scrupulous cleanliness. Rational use of cosmetics.	
	(3)	General questions relating to the maintenance of good health in women, with opportunity to discuss problems raised by the students in order to dispel fears based on old-time superstitions.	
	(4)	Local Government—general public health problems with reference to special circumstances.	
March ...	Seven	County Special Constabulary, Hackleton.	<i>Subject.</i> St. John First Aid Lectures. 20
March ...	One	Girls Training Corps, Rushden, Irthlingborough.	Social Biology and its implications. 90
April ...	One	Co-operative Women's Guild, Corby.	Venereal Diseases in Wartime. 120
May ...	One	Women's Land Army Hostel, Orlingbury.	Social Hygiene. 30
May ...	One	Women's Land Army Hostel, Wollaston.	Social Hygiene. 27
June ...	Five	Royal College of Nursing, Kettering.	(1) Diagnosis and Treatment of Venereal Diseases. 20
		„ „	(2) Social Implications of Venereal Diseases. 20
		Women's Land Army Hostel, Kislingbury.	Unwelcome Parasites. 35
		Moulton Agricultural Insititute W.L.A.	Hostel and Social Hygiene. 20
		Cotterstock and Thornby Nursing Association.	The Future of District Nursing. 60
October ...	One	St. John Nursing Div., Irthlingborough.	Venereal Diseases. 80

SECTION H.

STATISTICAL TABLES.

TABLE No. 1.

CAUSES OF DEATH, 1943.

<i>Causes of Death</i>						<i>Male</i>	<i>Female</i>	<i>Total</i>
1.	Typhoid and paratyphoid fevers	...	...			—	—	—
2.	Cerebro-spinal fever	...	...	...	...	—	—	—
3.	Scarlet fever	...	...	...	...	—	—	—
4.	Whooping cough	...	...	...	...	—	—	—
5.	Diphtheria	...	...	...	...	—	—	—
6.	Tuberculosis of respiratory system	...	...			2	3	5
7.	Other forms of tuberculosis	...	...	...		—	—	—
8.	Syphilitic diseases	...	...	...	...	1	—	1
9.	Influenza	...	...	...	...	1	2	3
10.	Measles	...	...	...	...	—	—	—
11.	Acute polio-myelitis and polio-encephalitis	...				—	—	—
12.	Acute infective encephalitis	...	...	...		—	—	—
13.	Cancer of buccal cavity and oesophagus (M.)	...				1	—	1
	uterus (F.)	...				—	1	1
14.	Cancer of stomach and duodenum	...	...			1	3	4
15.	Cancer of breast	...	...	...	...	—	3	3
16.	Cancer of all other sites	...	...	...		10	12	22
17.	Diabetes	...	...	...	...	1	—	1
18.	Intra-cranial vascular lesions	...	...	...		9	19	28
19.	Heart disease	...	...	...	...	28	21	49
20.	Other diseases of circulatory system	...	...			2	—	2
21.	Bronchitis	...	...	...	...	5	4	9
22.	Pneumonia	...	...	...	...	5	5	10
23.	Other respiratory diseases	...	...	...		1	—	1
24.	Ulcer of stomach or duodenum	...	...			—	—	—
25.	Diarrhoea under 2 years	...	...	...		—	—	—
26.	Appendicitis	...	...	...	...	1	1	2
27.	Other digestive diseases	...	...	...	...	1	1	2
28.	Nephritis	...	...	...	...	2	2	4
29.	Puerperal and post-abortive sepsis	...	...			—	—	—
30.	Other maternal causes	...	...	...	...	—	—	—
31.	Premature birth	...	...	...	...	—	—	—
32.	Congenital malformations, birth injury and infantile diseases	...	...	...		4	3	7
33.	Suicide	...	...	...	...	1	1	2
34.	Road traffic accidents	...	...	...	...	1	—	1
35.	Other violent causes	...	...	...	...	1	3	4
36.	All other causes	...	...	...	...	6	4	10
	ALL CAUSES	...	...	...	...	84	88	172

TABLE No. 2.

DEATHS FROM SELECTED CAUSES, 1929-1943.

Year	Non-Pulmonary Tuberculosis		Pulmonary Tuberculosis		Cancer		Diseases of Heart and Blood Vessels		Bronchitis, Pneumonia and other Respiratory Diseases	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
1929	—	—	12	0.85	21	1.49	39	2.76	9	0.64
1930	1	0.08	7	0.49	11	0.78	38	2.71	16	1.14
1931	—	—	10	0.70	17	1.18	47	3.29	23	1.61
1932	1	0.07	10	0.70	10	0.70	48	3.37	18	1.26
1933	2	0.13	14	0.97	20	1.39	53	3.69	9	0.62
1934	1	0.07	10	0.69	22	1.52	81	5.62	9	0.62
1935	6	0.41	5	0.34	16	1.09	51	3.50	12	0.82
1936	3	0.20	9	0.61	18	1.22	66	4.47	12	0.81
1937	—	—	4	0.26	21	1.41	68	4.56	10	0.67
1938	—	—	10	0.66	23	1.52	69	4.57	7	0.46
1939	1	0.06	11	0.70	23	1.46	57	3.63	9	0.57
1940	3	0.17	10	0.60	32	1.92	78	4.69	23	1.38
1941	1	0.06	13	0.52	32	1.81	79	4.48	26	1.47
1942	1	0.06	7	0.43	28	1.72	72	4.42	13	0.80
1943	—	—	5	0.32	32	2.00	51	3.29	20	1.29

TABLE No. 3.

DEATH AND BIRTH RATES FOR 1897-1943.

Year	Estimated Population mid-year	Nett Births		Nett Deaths belonging to District			
		No.	Rate per 1,000	Under 1 year		At all Ages	
				No.	Rate per 1,000	No.	Rate per 1,000
1897	10,950	393	35.8	59	150.1	164	15.0
1898	12,000	443	36.9	85	184.0	192	16.0
1899	12,245	463	37.8	49	105.8	145	11.8
1900	14,359	434	30.2	65	149.0	153	10.6
1901	12,453	424	33.6	46	108.4	123	9.7
1902	12,961	407	31.4	50	122.8	133	10.2
1903	13,337	404	30.2	37	91.5	139	10.4
1904	13,713	387	28.2	46	118.8	162	11.8
1905	14,089	328	23.2	36	109.7	119	8.4
1906	14,190	351	24.7	40	113.9	122	8.5
1907	14,816	315	21.2	25	79.3	131	8.1
1908	15,192	310	20.4	35	112.9	122	8.0
1909	15,817	284	17.9	31	109.1	130	8.2
1910	16,442	278	16.9	20	71.9	128	7.7
1911	13,377	281	21.0	29	103.2	130	9.7
1912	13,658	287	21.0	24	83.6	121	8.8
1913	13,752	237	17.2	19	80.1	118	8.7
1914	13,915	246	17.6	18	73.1	124	8.9
1915	13,787	277	19.9	30	108.3	145	10.5
1916	13,531*	256	17.3	15	58.5	138	10.1
	14,722†						
1917	12,315*	200	14.5	12	60.0	123	9.9
	13,728†						
1918	12,900*	185	12.7	8	43.2	129	10.0
	14,454†						
1919	13,850*	206	14.2	27	131.0	153	11.0
	14,428†						
1920	14,402	328	22.7	24	73.1	133	9.2
1921	13,720	273	19.8	22	80.5	147	10.7
1922	13,740	247	17.9	19	76.9	132	9.6
1923	13,790	243	17.6	12	49.3	131	9.4
1924	13,750	198	14.4	11	55.5	135	9.8
1925	13,780	211	15.3	13	61.6	138	10.0
1926	13,520	208	15.3	6	28.8	131	9.7
1927	13,550	174	12.8	10	57.4	139	10.2
1928	13,650	174	12.0	10	57.4	146	10.6
1929	14,020	174	12.4	9	51.7	127	9.0
1930	14,020	191	13.6	7	36.6	121	8.6
1931	14,280	161	11.3	8	49.7	154	10.8
1932	14,240	170	11.9	10	58.8	142	9.9
1933	14,370	168	11.7	7	47.6	159	11.1
1934	14,410	161	11.2	8	49.7	180	12.5
1935	14,550	176	12.1	15	85.2	155	10.7
1936	14,740	182	12.3	5	27.5	167	11.3
1937	14,890	191	12.9	6	31.4	155	10.4
1938	15,090	192	12.7	6	31.3	160	10.6
1939	15,690*	225	14.2	6	26.7	152	9.7
	15,200†						
1940	16,580	200	12.4	16	77.7	233	14.1
1941	17,600	193	10.9	11	54.1	185	10.5
1942	16,250	251	15.5	6	23.9	163	10.0
1943	—	281	18.1	8	28.47	172	11.1

(*) Estimated population for calculation of Birth Rates.

(†) Estimated population for calculation of Death Rates.

TABLE NO. 4.

COMPARISON OF STILLBIRTHS, ILLEGITIMATE BIRTHS
AND MASCULINITY OF BIRTH.

1934-43.

Year	Stillbirths per 1,000.		Illegitimate births per 1,000 live births.	Male births per 1,000 live female births.
	Population of all ages.	Total births (live and still)		
1934	0.55	47.32	49.69	1038
1935	0.76	58.83	39.77	934
1936	0.27	21.51	54.94	1166
1937	0.27	20.51	26.18	1010
1938	0.26	20.41	52.30	1087
1939	0.51	34.34	48.89	1008
1940	0.42	33.89	25.00	923
1941	0.51	44.54	56.99	1144
1942	0.31	19.54	75.70	1002
1943	0.89	47.45	53.46	1006

TABLE NO. 5.

CAUSES OF DEATH OF CHILDREN UNDER ONE YEAR.

Causes of Death				Age in Weeks					To- tal
				—1	—2	—3	—4	5-52	
I.	Congenital malformations	...	...	3	—	—	—	—	3
II.	Diseases of Early Infancy								
	Congenital debility & icterus			1	—	—	—	—	1
	Premature birth	...	...	—	—	—	—	—	—
	Injury at birth	...	...	1	—	—	—	—	1
	Atelectasis	...	...	—	—	—	—	—	—
	Others	...	...	—	—	—	—	—	—
III.	Diseases of Respiratory system			—	—	—	—	2	2
IV.	Diseases of Digestive system			—	—	—	—	—	—
V.	Diseases of Nervous system			—	—	—	—	—	—
VI.	Tuberculous diseases	...	...	—	—	—	—	—	—
VII.	Infectious diseases	...	...	—	—	—	—	—	—
VIII.	Syphilis	...	...	—	—	—	—	—	—
IX.	Overlaying	...	...	—	—	—	—	—	—
X.	Other Violence	...	...	—	—	—	—	—	—
XI.	All other causes	...	...	1	—	—	—	—	1
TOTALS				6	—	—	—	2	8

SUMMARY OF INSPECTIONS AND VISITS BY THE
SANITARY INSPECTOR.

Complaints received	...	...	...	...	...	...	85
Houses inspected	...	...	...	...	...	...	70
Premises for Voluntary improvement	...	...	...	...	...	...	6
Other premises	...	...	...	...	...	...	31
Secondary inspections	...	...	...	...	...	...	77
Factories Act, 1937.							
Factories, inspections of	...	...	...	...	...	...	3
Bakehouses, inspections of	...	...	...	...	...	...	2
Infectious Diseases, etc. Inspections.							
Diphtheria	...	...	...	...	...	...	—
Scarlet-Fever	...	...	...	...	...	...	17
Tuberculosis	...	...	...	...	...	...	1
Dysentery	...	...	...	...	...	...	1
Meningitis	...	...	...	...	...	...	2
Scabies	...	...	...	...	...	...	2
Other Diseases	...	...	...	...	...	...	1

TABLE No. 7.

DISINFECTIONS, ETC.

INFECTIOUS DISEASES, ETC.

Rooms.

Scarlet-Fever	...	...	...	...	...	...	21
Tuberculosis	...	...	...	...	...	...	4
Meningitis	...	...	...	...	...	...	1
Other diseases	...	...	...	...	...	...	49
Total							75

Articles.

Beds.	...	...	...	...	...	...	71
Pillows and bolsters	...	...	...	...	...	...	200
Bedding-sundry	...	...	...	...	...	...	280
Wearing apparel	...	...	...	...	...	...	135
Household articles	...	...	...	...	...	...	1
Books	...	...	...	...	...	...	40
Total							727

Articles destroyed.

Beds	...	...	...	...	...	...	8
Pillows and bolsters	...	...	...	...	...	...	12
Bedding-sundry	...	...	...	...	...	...	22
Total							42

CIVIL DEFENCE, FIRE WATCHING, ETC.

Articles.

Beds	...	...	...	...	...	...	53
Blankets	...	...	...	...	...	...	155
Pillows	...	...	...	...	...	...	36
Total							244

DISINFESTATIONS.
SCABIES AND OTHER INFESTATIONS.

Articles.

Beds	...	...	...	...	...	...	...	18
Pillows and bolsters	...	...	...	...	...	...	...	35
Bedding-sundry	...	...	...	...	...	...	...	56
Wearing apparel	...	...	...	...	...	...	...	22
Total								131

GOVERNMENT EVACUATION SCHEME.

Articles.

Beds	...	...	...	...	...	...	...	8
Pillows and bolsters	...	...	...	...	...	...	...	11
Bedding-sundry	...	...	...	...	...	...	...	122
Wearing apparel	...	...	...	...	...	...	...	68
Total								209

DISINFESTATION FROM VERMIN.

Rooms	24
--------------	-----	-----	-----	-----	-----	-----	-----	----

Articles.

Beds	...	...	...	...	...	...	...	11
Pillows and bolsters	...	...	...	...	...	...	...	22
Bedding-sundry	...	...	...	...	...	...	...	28
Total								61

TABLE No. 8.

DEFECTS REMEDIED DURING THE YEAR.

External walls repaired	...	...	...	...	...	...	3
Internal walls repaired	...	...	...	...	...	...	6
Roofs repaired	...	...	...	...	...	...	36
Chimney Stacks repaired or rebuilt	...	...	...	...	...	...	1
Rain water gutters repaired or refixed	...	...	...	...	...	...	3
Rain water pipes repaired or refixed	...	...	...	...	...	...	2
Windows repaired	...	...	...	...	...	...	6
Windows formed to open	...	...	...	...	...	...	1
Forecourts repaved	...	...	...	...	...	...	2
Yard paving repaired	...	...	...	...	...	...	3
Rooms stripped repaired and distempered	...	...	...	...	...	...	8
Passages and staircases repaired and distempered	...	...	...	...	...	...	2
Doors of rooms repaired	...	...	...	...	...	...	2
Wood floors repaired	...	...	...	...	...	...	5
Ceilings reconstructed	...	...	...	...	...	...	3
Ceilings repaired	...	...	...	...	...	...	5
Firegrates repaired	...	...	...	...	...	...	4
New Firegrates fixed	...	...	...	...	...	...	1
Fireplace flues repaired	...	...	...	...	...	...	2
Obstructions removed from flues in dwelling-houses	...	...	...	...	...	...	2
Smoke nuisances abated	...	...	...	...	...	...	4
Houses and contents cleansed	...	...	...	...	...	...	1
Obstructions removed from drains	...	...	...	...	...	...	1
Drains repaired	...	...	...	...	...	...	7
Inspection chambers constructed	...	...	...	...	...	...	1

Inspection chambers repaired	...	...	...	...	...	1
Sink waste pipes repaired or renewed	...	...	...	...	...	3
Water Service pipes repaired	...	...	...	...	...	2
Water closet seats repaired or renewed		...	...	...	...	4
Flushing cisterns repaired	...	...	...	...	...	7
New pans fixed in water closets	...	...	...	...	...	2
Water from adjoining land diverted from dwelling houses	...					1
Outhouses repaired	...	...	...	...	...	2
Dangerous fences reconstructed		...	...	...	...	2
Additional ventilation provided	...	...	...	...	...	2
Sanitary ashbins provided	...	...	...	...	...	125
Other nuisances abated	...	...	...	...	...	1

TABLE No. 9.

VOLUNTARY IMPROVEMENTS FOR 1943.

Outhouses converted into sanitary conveniences	...	...				2
Pedestal Water closet pans and flushing cisterns erected	...					6
Lavatory basins fixed	...	...	...	...	...	4
Baths fixed	...	...	...	...	...	2
Separate drainage schemes constructed together with filtering tanks and effluent sumps	...	...	...	...		1
Cesspools filled up and displaced	...	...	...	...		1
Inspection chambers constructed	...	...	...	...		4
House drain reconstructed	...	...	...	...		1
Drains constructed	...	...	...	...	...	9
Internal Water closets constructed	...	...	...	...		2
Soil and ventilating pipes erected		...	...	...		3
Gullies constructed	...	...	...	...	...	4
Back bedroom converted to bathroom		...	...	...		1
New sink together with waste pipe fixed	...	...	...	...		1
Water supply laid on in place of well	...	...	...	...		1

Factories.

Drains constructed	...	...	...	...	...	3
Floors drained	...	...	...	...	...	1
Extra sanitary conveniences provided	...	...	...	...		1
Pedestal pans and flushing cisterns fixed	...	...	...	...		1

Car Parks.

Pavings constructed	...	...	...	...	...	1
Gullies constructed	...	...	...	...	...	3
Drains constructed	...	...	...	...	...	4
Petrol and oil interceptors constructed	...	...	...	...		1

TABLE No. 10.

HOUSING.

1. Inspection of Dwelling-houses during the year—

1.	(a)	Number of dwelling-houses inspected for defects (under Public Health or Housing Acts)	...	...	78
	(b)	Inspections made for the purpose	...	...	78
2.	(a)	Number of dwelling-houses inspected and recorded under Housing Consolidated Reg. 1925/32	...	...	40
	(b)	Inspections made for the purpose	...	...	40
3.		Number of dwelling-houses found to be in a state dangerous or injurious to health as to be unfit for human habitation	...	...	—
4.		Dwelling-houses (exclusive of those under preceding subhead) not in all respects reasonably fit for habitation	...	...	35

2. Remedy of Defects during the year without Service of Formal Notice—

Number of houses rendered fit in consequence of action by Local Authority or Officers :

Housing Act	...	...	...	...	24
Public Health Act	...	...	...	...	54

3. Action under Statutory Powers during the year—

A. Proceedings under Section 9, 10 and 16 Housing Act, 1936.

1.	Dwelling-houses in respect of which notices were served requiring repairs	...	...	...	—
2.	Dwelling-houses rendered fit after service of formal notice	...	...	...	—
	(a) By owners	...	...	...	—
	(b) By Local Authority in default of owners	...	...	...	—

B. Proceedings under Public Health Acts—

1.	Dwelling-houses in respect of which notices were served requiring defects to be remedied	...	...	...	—
2.	Dwelling-houses in which defects were remedied after service of formal notice—				
	(a) By Owners	...	...	...	—
	(b) By Local Authority in default of owners	...	...	...	—

C. Proceedings under Section 11 and 13 of the Housing Act, 1936.

1.	Dwelling-houses in respect of Demolition Order	...	—
2.	Dwelling-houses demolished	...	—

D. Proceedings under Section 12 of the Housing Act, 1936.

1.	Separate tenements or underground rooms in respect of which Closing Orders were made	...	—
2.	Number of separate tenements or underground rooms in respect of which Closing Orders were determined	...	—

4. Housing Act, 1936—Part 4—Overcrowding—

(a)	1.	Number of dwelling-houses overcrowded	...	—
	2.	Number of families dwelling therein	...	—
	3.	Number of persons dwelling therein	...	—
(b)		Number of cases of overcrowding reported	...	1
(c)	1.	Number of cases of overcrowding relieved	...	—
	2.	Number of persons concerned in such cases	...	—

TABLE No. 11.

SAMPLES OF MILK TAKEN FOR BACTERIOLOGICAL TESTS OF CLEANLINESS.

Month				No.	Good	Mod.	Bad
January	...	...		10	4	2	4
February	...	...		8	2	5	1
March	...	...		7	6	—	1
April	...	...	...	9	5	3	1
May	...	...	...	9	6	1	2
June	...	...	...	21	7	5	9
July	...	...	...	—	—	—	—
August	...	...		12	3	4	5
September	...	...		12	8	3	1
October	...	...		12	10	1	1
November	...	...		12	8	4	—
December	...	...		12	9	2	1
Totals	...	...		124	68	30	26

TABLE No. 12.

FOODS FOUND TO BE UNFIT FOR HUMAN CONSUMPTION.

Tins of canned pork luncheon meat	...	...	...	...	No.
„ „ „ corned beef	...	...	...	...	97
„ „ „ sausage	...	...	...	...	58
„ „ „ fish	...	...	...	...	1
„ „ „ soup	...	...	...	...	93
„ „ „ vegetables	...	...	...	...	5
„ „ „ milk	...	...	...	...	42
„ „ „ fruit	...	...	...	...	25
„ „ „ jam	...	...	...	...	43
Quantities of cooked meat	...	...	...	...	3
Pork pies	...	...	...	...	14
Quantity of cheese	...	...	...	...	36
Side of bacon	...	...	...	...	2
Boxes of wet fish	...	...	...	...	1
Bags of potatoes	...	...	...	...	16
Tins of canned corned beef	...	...	...	...	30
Total weight	...	1 Ton :	17 Cwt. :	1 Qr. :	19 Lb.
					863

TABLE No. 13.

CARCASES INSPECTED.

Oxen	...	...	...	...	...	...	...	2,715
Calves	...	...	...	...	...	...	...	851
Sheep	...	...	...	...	...	...	...	12,273
Pigs	...	...	...	...	...	...	...	744
Goat	...	...	...	...	...	...	...	1
Total	...	...	...	...	...	...	...	16,584
Number of Visits to slaughterhouse	...	...	...	...	...	...	...	512
Weight of meat found unfit	...	37 Tons :	4 Cwt. :	2 Qr. :	19 Lb.			

TABLE NO. 14.

**MEASLES AND WHOOPING COUGH.
AGE AND SEX INCIDENCE.**

<i>Age Periods</i>	<i>Measles.</i>		<i>Whooping Cough.</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
— 6 months	2	1	3	4
—12 ,,	7	11	5	3
—18 ,,	13	13	3	2
— 2 years	4	10	2	2
—2½ ,,	21	17	4	5
— 3 ,,	8	8	1	1
— 4 ,,	26	35	7	5
— 5 ,,	43	36	6	4
—10 ,,	115	114	8	6
—15 ,,	5	8	—	1
15 ,, +	—	5	—	—
ALL AGES ...	244	258	39	33
TOTALS ...	502		72	

TABLE NO. 15.

**BIRTH-RATES, CIVILIAN DEATH-RATES, ANALYSIS
OF MORTALITY AND CASE RATES FOR CERTAIN
INFECTIOUS DISEASES FOR RUSHDEN URBAN
DISTRICT AND ENGLAND AND WALES.**

1943.

				<i>England and Wales</i>	<i>Rushden</i>
Live Births	...	...	...	16.50	18.14
Stillbirths	...	...	...	0.50	0.89
Deaths.					
All Causes	...	...		12.10	11.11
Typhoid	...	...	...	0.00	0.00
Scarlet fever	...	...		0.00	0.00
Whooping Cough		...		0.03	0.00
Diphtheria	...	...	...	0.03	0.00
Influenza	...	...	...	0.37	0.19
Measles	...	...	...	0.02	0.00
Deaths under one year		...		49.00	28.47
Notifications.					
Typhoid	...	...	...	0.01	0.00
Cerebro-spinal fever		...		0.08	0.12
Scarlet fever	...	...		3.01	1.23
Whooping Cough		...		2.54	4.64
Diphtheria	...	...	...	0.88	0.00
Erysipelas	...	...	...	0.31	0.51
Measles	...	...	...	9.88	32.40
Pneumonia	...	...		1.34	5.10

TABLE No. 16.

MONTHLY INCIDENCE OF INFECTIOUS DISEASES.
(*Other than Tuberculosis*) 1943.

<i>Disease</i>	January	February	March	April	May	June	July	August	September	October	November	December	TOTAL
Small-pox ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet fever ...	3	1	2	2	1	1	1	1	1	3	2	1	19
Puerperal pyrexia	—	—	—	—	—	—	—	1	—	—	—	—	1
Pneumonia ...	3	17	15	2	3	4	1	4	3	2	8	17	79
Erysipelas ...	1	—	1	1	2	—	1	—	—	—	1	1	8
Dysentery ...	—	—	—	1	—	—	—	—	—	—	—	—	1
Chicken-pox ...	—	—	—	—	—	—	—	—	1	—	—	—	1
Cerebro-spinal fever	—	—	1	—	—	1	—	—	—	—	—	—	2
Measles ...	1	1	13	180	196	93	12	4	—	—	1	1	502
Whooping cough	4	18	24	8	11	3	—	—	—	1	2	1	72
TOTALS ...	12	37	56	194	213	102	15	10	5	6	14	21	685

TABLE NO. 17.

AGE INCIDENCE OF INFECTIOUS DISEASES.

(Other than Tuberculosis) 1943.

<i>Disease.</i>	—1	—2	—3	—4	—5	—10	—15	—20	—35	—45	—65	65 +	All Ages	Removed to Hospital	Deaths
Small-pox ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet fever ...	—	—	—	4	3	4	7	1	—	—	—	—	19	4	—
Puerperal pyrexia	—	—	—	—	—	—	—	—	1	—	—	—	1	1	—
Pneumonia ...	6	2	3	4	1	9	2	2	4	11	21	14	79	—	10
Erysipelas ...	—	—	—	—	—	—	—	—	1	2	4	1	8	—	—
Dysentery ...	—	—	—	—	—	—	1	—	—	—	—	—	1	1	—
Chicken-pox ...	—	—	—	—	—	1	—	—	—	—	—	—	1	1	—
Cerebro-spinal fever	—	—	—	—	—	—	—	—	1	—	1	—	2	2	—
Measles ...	3	58	54	61	79	229	13	5	—	—	—	—	502	—	—
Whooping cough	15	9	11	12	10	14	1	—	—	—	—	—	72	—	—
TOTALS ...	24	69	68	81	93	257	24	8	7	13	26	15	685	9	10

TABLE NO. 18.

NEW CASES OF AND DEATHS FROM TUBERCULOSIS, 1943.

<i>Age Periods</i>	NEW CASES				DEATHS			
	<i>Respiratory</i>		<i>Non-Respiratory</i>		<i>Respiratory</i>		<i>Non-Respiratory</i>	
	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
— 1	—	—	—	—	—	—	—	—
— 5	—	—	—	1	—	—	—	—
—15	—	1	—	2	—	—	—	—
—25	3	3	—	1	—	2	—	—
—35	1	—	—	—	1	—	—	—
—45	1	2	—	—	—	1	—	—
—55	1	—	—	1	—	—	—	—
—65	1	—	—	—	1	—	—	—
65 +	—	—	—	—	—	—	—	—
<i>Totals</i>	7	6	—	5	2	3	—	—

